

<b>REQUEST FOR ORAL HEARING</b> BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 32286-192724
	In re Application of <span style="float: right;">Whitbourne et al.</span>	
	Application Number 09/834,307-Conf. #3036	Filed April 12, 2001
	For <span style="float: right;">TARGETED THERAPEUTIC AGENT RELEASE DEVICES AND METHODS OF MAKING AND USING THE SAME</span>	
	Art Unit <span style="float: right;">1618</span>	Examiner <span style="float: right;">M. P. Young</span>
Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application.		
The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3))		\$ <u>1,080.00</u>
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ <u>540.00</u>
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>22-0261</u> .		
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550.		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
I am the		
<input type="checkbox"/> applicant/inventor.		<u>/Ryan M. Flandro/</u> Signature
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>Ryan M. Flandro</u> Typed or printed name
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>58,094</u>		<u>February 9, 2010</u> Date
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		<u>(202) 344-4000</u> Telephone number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.		